



## Office of Refugee Resettlement Refugee Program Physical and Behavioral Health Promising Practice



### Saint Alphonsus Regional Medical Center Community Health Advisor Program

In 2008, The Saint Alphonsus Regional Medical Center in Boise, Idaho, launched an interpretation service to ensure services could be delivered to clients in their primary language. To meet this need, Saint Alphonsus began employing interpreters directly through the medical center, hiring individuals as contractors. In 2013, The Saint Alphonsus Medical Group Center for Global Health and Healing (CGHH)<sup>1</sup>, adapted the medical center's interpretation service to develop the Community Health Advisor program. The Community Health Advisor program expanded on the existing interpretation service by providing clients with trauma-informed, culturally, and linguistically competent support.



### Practice Description

CGHH recruits trusted members from the communities represented in their client demographic to become trained health advisors. Health advisors provide medical and mental health interpretation upon completion of certification with CGHH. As independent contractors, health advisors also have the opportunity to work as paid community interpreters for community agencies in need of interpretation services. The Community Health Advisor program provides a framework for clients to feel comfortable navigating the healthcare system and ensures accurate communication between healthcare providers and clients. Health advisors are members of the larger treatment team and provide valuable feedback to CGHH staff for the continual improvement of service delivery. In addition to completing the initial certification, health advisors are provided with ongoing training and support on various topics from work-life balance to working with members of a treatment team.

<sup>1</sup> The Saint Alphonsus Medical Group Center for Global Health and Healing (CGHH) provides services through a maternal and child health clinic, an international family clinic and a program for survivors of torture.



## Need for the Practice

Prior to the implementation of the Community Health Advisor program, CGHH staff noticed a high number of missed appointments with no cancellation notice provided. CGHH also sought to improve their client-contact outcomes and bridge the gap between standard Western medicine practices to ensure a clients' culture and trauma history were properly understood and factored into treatment modalities. Health advisors are crucial in supporting clients in learning the healthcare system in their communities and encouraging clients to be active in their journey of healing.



## How to Implement the Practice

CGHH described the following key steps to implement this practice:

- Conduct outreach to recruit potential health advisors and offer information sessions to provide program details. During this process CGHH staff assess candidates to determine suitability for the position in consideration of the clients to be served (gender, country of origin, trauma background of client and health advisor, etc.)
- Work with current and/or former clients to build a pool of applicants trusted among community members to serve as health advisors. This is crucial to the success of the program as health advisors communicate with providers to filter crucial information to the client.
- Provide support to health advisors in obtaining certification.
- Provide ongoing training, orientation, resources, and workshops that are scheduled or held on a case-by-case basis.
- Upon completion of the training and certification, work with organization staff to assist health advisors in becoming eligible for other paid interpretation opportunities. Health advisors sign an independent contract agreement that specifies the pay rate and outlines the scope of work, in accordance with organizational policies and procedures.
- Ensure a diverse pool of community interpreters to account for case specific factors (e.g. gender, trauma experience, linguistic dialects, etc.).
- Appoint agency staff member to oversee the program – ensuring ongoing learning and training for the identified staff member.



## Preliminary Results

CGHH provided output data used to inform changes to and measure the effectiveness of this practice. Specific examples include:

- CGHH reports a reduction in the number of no-call/no-show appointments for clients served. Data noted 20% of scheduled appointments were cancelled without communication to provider staff prior to the implementation of the Community Health Advisor program. Over the course of a three-year time frame, CGHH saw a reduction to 5% of appointments being cancelled and labeled as a no-call/no-show. CGHH noted health advisors were actively assisting clients in rescheduling appointments or providing support on ensuring appointments were completed.
- CGHH saw a decrease in the number of emergency room visits as health advisors assisted clients in understanding the purpose of ongoing specialists and other providers versus immediate emergency room assistance.<sup>2</sup>
- CGHH reported an improvement in communication between healthcare providers and clients, noting health advisors assisted in providing cultural context and increased accuracy in reporting client feedback due to a larger representation of dialects. In recruiting, the health advisor program factors in not only trauma and cultural competency, but also linguistic competency.



## Inputs/Resources

Agencies should expect to invest some funding and time to implement this practice. Below are key inputs and resources needed to adopt this practice.

- Interested individuals who are, at a minimum, bilingual and have language proficiency in their working languages.
- Structured training curriculum and experienced trainers who bring their expertise and real-life experiences into the classroom. Training should also include an investment in resource materials to support ongoing learning and professional development.
- Training for staff coordinating such a program to ensure continual learning and cultural competency for the advisors to be supported.
- Consideration of financial aspects to include review of state and organizational guidelines when planning for permanent or contracted staff positions.
- Funding to cover expenses for training supplies and the resources needed to support interpreters.

<sup>2</sup> Health advisors are not trained medical professionals and therefore do not provide medical or mental health advice to clients. Health advisors are utilized to educate clients on community medical/mental health resources to empower clients to make the best decision for their individual health.



## Contextual Considerations

Agencies should consider the following contextual factors that may impact implementing this practice.

CGHH's Community Health Advisor program currently employs advisors as contractors. Therefore, there are several factors Saint Alphonsus staff consider when matching clients with health advisors, such as hours of availability, rate of pay, ongoing recruitment to meet capacity demands, and state and local laws and guidelines surrounding employment.

***What is a Promising Practice?*** A promising practice is a unique and/or innovative approach, method, or technique that has demonstrated effectiveness and is replicable. ORR's Refugee Program primarily identifies potential promising practices during recipient and subrecipient monitoring and engages in a validation process to ensure the practice meets the standards to classify it as "promising." Each practice falls under one of the following domains: Physical and Behavioral Health, Employment and Economic Stability, Education and English Language, or Social Adjustment and Integration.